

CONFERENCE INFORMATION REPORT

CIVIL ACTION NO. _____

JURY TRIAL _____ **NON-JURY TRIAL** _____ **ARBITRATION** _____

SHORT CAPTION _____

TRIAL COUNSEL _____

REPRESENTING _____

LAW FIRM _____

ADDRESS _____

TELEPHONE & FAX _____

DATE FOR COMPLETION OF ALL DISCOVERY _____

PROTRACTED DISCOVERY REQUIRED? _____

Yes/No

IF YES, DESCRIBE PROPOSED DISCOVERY SEGMENTS BY SUBJECT MATTER OR PARTIES AND SUGGEST DATES FOR SEGMENTS:

SETTLEMENT CONFERENCE: WHEN REQUESTED? _____

MAGISTRATE JUDGE _____ **COURT MEDIATOR** _____ **PRIVATE MEDIATOR** _____
(LOCAL CIV. R. 53.3) _____ (Name) _____

TRIAL TIME: TIME TO PRESENT YOUR CASE _____

TIME FOR ENTIRE TRIAL _____

OTHER COMMENTS:

DATE: _____

SIGNATURE OF COUNSEL _____

TYPE OR PRINT NAME _____

This form should be faxed to Chambers at 267.299.5078 or mailed or hand delivered to Chambers, Room 3810, U.S. Courthouse, 601 Market Street, Philadelphia, PA 19106-1741.
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